

BEST AVAILABLE COPY

ISSUE SLIP STAPLED AREA (for additional copy reference)

091913329

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			8-29-01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)...	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	
1	12/16/02
2	N
3	
4	2
5	
6	✓
7	N
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14	
15	N
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17	
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20	
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25	
26	
27	
28	✓
29	✓
30	N
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37	
38	N
39	✓
40	✓
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Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here